PTO/SB/06 (08-0;
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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 |   |  |                |   |                    |                    |                        | Application or Docket Number 09942835 |                            |                                       |
|---|---|--|----------------|---|--------------------|--------------------|------------------------|---------------------------------------|----------------------------|---------------------------------------|
| CLAIMS AS FILED – PART I (Column 1) (Column 2)                          |   |  |                |   |                    | SMALL ENTITY       |                        | OR -                                  | OTHER THAN<br>SMALL ENTITY |                                       |
|   | FOR   | NU                                       | NUMBER FILED   |   | NUMBER EXTRA       |                    | FEE                    |                                       | RATE                       | FEE                                   |
|   | SIC FEE<br>CFR 1.16(a))   |  |                |   |                    | RATE               | \$                     | OR                                    |                            | \$                                    |
| TOT   | AL CLAIMS<br>CFR 1.16(c))                                       |  | minus 20 =     |   |                    | V                  | <u> </u>               | 1                                     | V                          |                                       |
| IND   | EPENDENT CLAI   | MS                                       |                |   |                    | × \$ =             |                        | OR                                    | × \$=                      | ļ                                     |
| (37   | CFR 1.16(b))  |  | minus 3 =      |   |                    | × \$=              |                        | OR                                    | × \$=                      |                                       |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))                       |   |  |                |   |                    | + \$=              |                        | OR                                    | + \$=                      |                                       |
| • If t  | he difference in o  | column 1 is les                          | s than zero, e | nter "0" in column                          | TOTAL              |                    | OR                     | TOTAL                                 |                            |                                       |
|   | С   | LAIMS AS A                               | AMENDED        | – PART II                                   |                    |                    |                        |                                       |                            |                                       |
|   |   | (Column 1)                               | )<br>          | (Column 2)                                  | (Column 3)         | SMALL E            | NTITY                  | OR                                    |                            | R THAN<br>ENTITY                      |
| ENT A   |   | CLAIMS<br>REMAININ<br>AFTER<br>AMENDMEI  |                | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA   | RATE               | ADDI-<br>TIONAL<br>FEE |                                       | RATE                       | ADDI-<br>TIONAL<br>FEE                |
| )ME   | Total<br>(37 CFR 1.16(c))                                       | •  | Minus          | **  | =                  | x \$ =             |                        | OR                                    | X \$ =                     |                                       |
| <b>AMENDMENT</b>  | Independent<br>(37 CFR 1.16(b))                                 | •  | Minus          | ***   | =                  | x \$ =             |                        | OR                                    | x \$ =                     |                                       |
| AM  | FIRST PRESENT   | TATION OF MUL                            | TIPLE DEPEND   | ENT CLAIM (37 CI                            | FR 1.16(d))        | + \$ =             | ·                      | OR                                    | +\$ =                      |                                       |
|   |   |  |                |   |                    | TOTAL<br>ADD'L FEE |                        | OR                                    | TOTAL<br>ADD'L FEE         |                                       |
|   |   | (Column 1)                               |                | (Column 2)                                  | (Column 3)         | •                  |                        | 4                                     |                            | · · · · · · · · · · · · · · · · · · · |
| MENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN | G              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT EXTRA      | RATE               | ADDI-<br>TIONAL<br>FEE |                                       | RATE                       | ADDI-<br>TIONAL<br>FEE                |
| M   | Total<br>(37 CFR 1.16(c))                                       | •  | Minus          | ••  | =                  | x \$=              |                        | OR                                    | × \$=                      |                                       |
| AMENDN  | Independent<br>(37 CFR 1.16(b))                                 | •  | Minus          | •••   | =                  | x \$=              | ***                    | OR                                    | X \$=                      |                                       |
| ¥   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |  |                |   |                    | + \$ =             |                        | OR                                    | + \$ =                     |                                       |
|   |   |  |                |   |                    | TOTAL<br>ADD'L FEE | <del></del>            | OR                                    | TOTAL<br>ADD'L FEE         |                                       |
|   |   | (Column 1)                               |                | (Column 2)                                  | (Column 3)         |                    |                        |                                       |                            | 3                                     |
| ENTC  | 8-13-04   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN | 1              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA   | RATE               | ADDI-<br>TIONAL<br>FEE |                                       | RATE                       | ADDI-<br>TIONAL<br>FEE                |
| M   | Total<br>(37 CFR 1.16(c))                                       | . 18                                     | Minus          | 32  | =                  | x \$=              |                        | OR                                    | × \$=                      |                                       |
| AMENDMENT   | Independent<br>(37 CFR 1.16(b))                                 | • 7                                      | Minus          | 4   | =                  | × \$=              |                        | OR                                    | × \$=                      |                                       |
| ₹   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |  |                |   |                    | + \$=              |                        | OR                                    | + \$=                      |                                       |
|   | If the entry in o   | olumo 1 is loss                          | than the onto  | v in column 2. writ                         | 1a "O" in column 3 | TOTAL<br>ADD'L FEE |                        | OR                                    | TOTAL<br>ADD'L FEE         |                                       |

<sup>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</sup>